Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 1 of 64

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
CENTRAL DISTRICT OF CALIFORNIA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Euis First name Fernando Middle name Montoya, Jr. Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Luis Fernando Montoya	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9909	

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 2 of 64 Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	14540 Artic Fox Ave.	If Debtor 2 lives at a different address:
		Rumber, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Riverside County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 3 of 64 Case number (if known)

Par	t 2: Tell the Court About	Your B	Bankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see Notice Re		342(b) for Individuals Filin	ng for Bankruptcy
	choosing to file under	☐ Chapter 7						
		□с	hapter 11					
		□с	hapter 12					
		■ C	hapter 13					
8.	How you will pay the fee	•	about how yo	u may pay. Ty attorney is sub	pically, if you are paying	the fee yourself, you	lerk's office in your local or may pay with cash, cashie orney may pay with a cred	er's check, or money
					stallments. If you choose ts (Official Form 103A).	e this option, sign and	attach the Application for	Individuals to Pay
			but is not req applies to you	uired to, waive ur family size a	your fee, and may do so nd you are unable to pay	o only if your income is y the fee in installmen	are filing for Chapter 7. B s less than 150% of the of ts). If you choose this opti (3B) and file it with your pe	ficial poverty line that on, you must fill out
9.	Have you filed for bankruptcy within the	■ No	o.					
	last 8 years?	□ Ye	es.					
			District		When		Case number	
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy	■ No	0					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	□ Ye	es.					
	affiliate?							
			Debtor				Relationship to you	
			District		When		Case number, if known	-
			Debtor		When		Relationship to you	
			District		When		_ Case number, if known	
11.	Do you rent your residence?	■ No	Go to I	ine 12.				
		□ Ye	es. Has yo	ur landlord obt	ained an eviction judgm	ent against you and d	o you want to stay in your	residence?
				No. Go to line	12.			
				Yes. Fill out Ir bankruptcy pe		n Eviction Judgment A	gainst You (Form 101A) a	nd file it with this

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 4 of 64 Case number (if known)

ar	Report About Any Bu	sinesses	You Own as	a Sole Propriet	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Par	t 4.	
		☐ Yes.	Name and	location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of b	ousiness, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, S	Street, City, Stat	te & ZIP Code
	it to this petition.		Check the	appropriate bo	x to describe your business:
			☐ He	ealth Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
			☐ Si	ngle Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
			☐ St	ockbroker (as de	efined in 11 U.S.C. § 101(53A))
			□ Co	ommodity Broke	er (as defined in 11 U.S.C. § 101(6))
				one of the above	9
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> <i>debtor?</i>	deadline operation	s. If you indicans, cash-flow s G.C. 1116(1)(B	ite that you are a statement, and for ().	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of dederal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	No.	i am not ii	ling under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing Code.	under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing	under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4: Report if You Own or	Have Any	/ Hazardous I	Property or Any	y Property That Needs Immediate Attention
4.	Do you own or have any	= N.			
	property that poses or is	■ No.			
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the h	nazard?	
	public health or safety?				
	Or do you own any property that needs immediate attention?		If immediate needed, why	attention is is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the	property?	
					Number, Street, City, State & Zip Code

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Page 5 of 64 Case number (if known) Main Document

Debtor 1 Luis Fernando Montoya, Jr.

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2	(Spouse	Only in a	Joint Cas	se):
-----------------------	---------	-----------	-----------	------

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

> I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc

Debtor 1	Luis Fernando Montoya, Jr.	Main Document	Case number (if known)	
Debtor 1	Luis Fernando Montoya, Jr.	Main Document		

Part	6: Answer These Questi	ons for Re	porting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consulindividual primarily for a personal, ☐ No. Go to line 16b.	mer debts? Consumer debts are defined family, or household purpose."	in 11 U.S.C. § 101(8) as "incurred by an		
			■ Yes. Go to line 17.				
		16b.		ss debts? Business debts are debts that nt or through the operation of the busines			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe th	at are not consumer debts or business de	ebts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	o to line 18.			
after any exempt are paid that funds will be available property is excluded and				u estimate that after any exempt property e to distribute to unsecured creditors?	is excluded and administrative expenses		
	administrative expenses are paid that funds will		□ No				
	be available for distribution to unsecured creditors?	e for					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	\$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
Part	7: Sign Below						
For		If I have of United St. If no attor document I request I understate bankruptor and 3571 /s/ Luis Luis Fei	hosen to file under Chapter 7, I amates Code. I understand the relief and the represents me and I did not part, I have obtained and read the notion relief in accordance with the chapter and making a false statement, concey case can result in fines up to \$25. Fernando Montoya, Jr. Trando Montoya, Jr. To Debtor 1	under penalty of perjury that the information aware that I may proceed, if eligible, under available under each chapter, and I choose ay or agree to pay someone who is not an icce required by 11 U.S.C. § 342(b). Ber of title 11, United States Code, specified ealing property, or obtaining money or proceeding property, or obtaining money or proceeding property. Signature of Debtor 2 Executed on	der Chapter 7, 11,12, or 13 of title 11, et to proceed under Chapter 7. attorney to help me fill out this d in this petition. sperty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519,		
			MINI / DD / YYYY	MM / DI	D / YYYY		

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Page 7 of 64 Case number (if known) Main Document

Debtor 1 Luis Fernando Montoya, Jr.

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Anthony B. Vigil, Esq. Signature of Attorney for Debtor	Date	August 31, 2017 MM / DD / YYYYY				
Anthony B. Vigil, Esq.						
Law Offices of Anthony B. Vigil, APC						
27201 Puerta Real, Suite 300 Mission Viejo, CA 92691	•					
Number, Street, City, State & ZIP Code Contact phone 949-432-4808	Email address	anthony@vigillawgroup.com				
259597 Bar number & State						

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

6:06-bk-12554-DN Chapter 7 Case Filed: 09/12/2006 Discharged: 01/18/2007

None

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner

of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

that was filed with any such prior proceeding(s).)

None

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed at Eastvalle, CA , California. /s/ Luis Fernando Montoya, Jr.

Luis Fernando Montoya, Jr.

Signature of Debtor

Signature of Joint Debtor

		Main Document	Page 9 of 64			
Fill	in this information to identify your case	:				
Deb	otor 1 Luis Fernando Monto	va. Jr.				
	First Name	Middle Name	Last Name			
	otor 2 use if, filing) First Name	Middle Name	Last Name			
Uni	ted States Bankruptcy Court for the: CE	NTRAL DISTRICT OF CALIF	ORNIA			
Cas	se number					
	own)				Check if this is an	
				i	amended filing	
	ficial Form 106Sum					
			rtain Statistical Information		12/15	
info you	rmation. Fill out all of your schedules fir roriginal forms, you must fill out a new	st; then complete the inforr	ng together, both are equally responsible for nation on this form. If you are filing amend x at the top of this page.			le
Par	t 1: Summarize Your Assets					
					/our assets /alue of what you own	ì
1.	Schedule A/B: Property (Official Form 3 1a. Copy line 55, Total real estate, from 5	06A/B) Schedule A/B		;	\$ 272,000	.00
	1b. Copy line 62, Total personal property	, from Schedule A/B		;	\$116,671	.00
	1c. Copy line 63, Total of all property on	Schedule A/B		;	\$ 388,671	.00
Par	t 2: Summarize Your Liabilities					
				Y	our liabilities	
				Α	Amount you owe	
2.	Schedule D: Creditors Who Have Claims 2a. Copy the total you listed in Column A		Form 106D) om of the last page of Part 1 of Schedule D	;	\$ 739,495	.00
3.	Schedule E/F: Creditors Who Have Unse 3a. Copy the total claims from Part 1 (pr		06E/F) ine 6e of S <i>chedule E/F</i>	;	\$0	0.00
	3b. Copy the total claims from Part 2 (no	npriority unsecured claims) from	om line 6j of Schedule E/F	(\$ 111,767	'.00
			Your total liabilities	\$_	851,262.0	0
Par	t 3: Summarize Your Income and Exp	enses				
4.	Schedule I: Your Income (Official Form 1	uei)				
4.				,	\$ 11,492	.00
5.	Schedule J: Your Expenses (Official Forr Copy your monthly expenses from line 2:			:	\$8,404	.00
Par	4: Answer These Questions for Adn	ninistrative and Statistical R	ecords			
6.	Are you filing for bankruptcy under Ch	apters 7, 11, or 13?				
٥.		•	s box and submit this form to the court with yo	ur oth	ner schedules.	
	Yes					
7.	What kind of debt do you have?					
	Your debts are primarily consume household purpose." 11 U.S.C. § 10		e those "incurred by an individual primarily for tistical purposes. 28 U.S.C. § 159.	a per	rsonal, family, or	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Main Document

Debtor 1 Luis Fernando Montoya, Jr.

Page 10 of 64 Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

13,941.00

\$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	38,816.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	38,816.00

	Case	e 6:17-bk-17		oc 1	Filed Ocumen		Entered e 11 of 64	08/31/17	10:15:4	13	Desc
Fill	in this inform	nation to identify	your case and th								
Deb	tor 1		do Montoya, Jr.								
	otor 2 use, if filing)	First Name	Middle			Last Name Last Name					
			the: CENTRAL		CT OF CAL						
Unit	eu States bar	ikrupicy Court for	the: CENTRAL	ואוכוט	CT OF CAL	.IFORNIA					
Cas	e number										Check if this is an amended filing
SC n eac hink nfori	chedule ch category, se it fits best. Be	e as complete and a space is needed,	_	e. If two	married peo	ple are filing to	gether, both are	equally respor	sible for su	pplyin	g correct
Part	1: Describe E	Each Residence, B	uilding, Land, or Oth	ner Real	Estate You	Own or Have ar	n Interest In				
. Do	you own or h	ave any legal or eq	quitable interest in a	ny resid	ence, buildir	ng, land, or sim	ilar property?				
	No. Go to Part	2.									
1.1		t ic Fox Ave. f available, or other des	scription	What	Single-fami	erty? Check all tha ily home nulti-unit building					exemptions. Put s on <i>Schedule D:</i>
					·	um or cooperativ		Creditors Wh	o Have Clain	ns Sec	ured by Property.
	Eastvale	CA	92880-1092		Land	red or mobile hor	me	Current valu	rty?		rent value of the ion you own?
	City	State	ZIP Code		Investment Timeshare	property			,000.00		\$272,000.00
				□ Who	Other	est in the prope	erty? Check one		simple, tena		vnership interest by the entireties, or
	Riverside				Debtor 1 or	•					
	County				Debtor 2 or Debtor 1 ar	nly nd Debtor 2 only					
						e of the debtors a	and another	Check if	f this is com uctions)	munit	y property
						n you wish to ac ation number:	dd about this iten	n, such as loca	al		
			ortion you own for Part 1. Write that						>		\$272,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 12 of 64
Case number (if known)

Debtor 1 Luis Fernando Montoya, Jr.

•	Yes				
3.1	Make:	Subaru	Who has an interest in the property? Check one	Do not deduct secured cl	
	Model:	Crosstrek	■ Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	2017	☐ Debtor 2 only	Current value of the	Current value of the
	Approxim	nate mileage: 3,500	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		ormation:	☐ At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$24,098.00	\$24,098.00
3.2	Make:	Nissan	Who has an interest in the property? Check one	Do not deduct secured cla	
	Model:	GT-R	■ Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	2016	☐ Debtor 2 only		
		nate mileage: 3,000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other info		☐ At least one of the debtors and another		,,
			☐ Check if this is community property (see instructions)	\$85,237.00	\$42,618.50
3.3	Make:	BMW 428i l4 Turbo	Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	d claims on Schedule D:
	Year:	2015	Debtor 2 only	Current value of the	Current value of the
	Approxim	nate mileage: 45,000	Debtor 1 and Debtor 2 only	entire property?	Current value of the portion you own?
	Other info		☐ At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$27,625.00	\$13,812.50
3.4	Make:	Harley Davidson	Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	d claims on Schedule D:
	Year:	2016	Debtor 2 only		
		nate mileage: 250	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other info		☐ At least one of the debtors and another		- -
			☐ Check if this is community property (see instructions)	\$8,359.00	\$8,359.00
3.5	Make:	KTM	Who has an interest in the property? Check one	Do not deduct secured clause the amount of any secure	d claims on Schedule D:
	Model:	SX-350	Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.
	Year:	2017	Debtor 2 only	Current value of the	Current value of the
		nate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other info	ormation:	At least one of the debtors and another		
			☐ Check if this is community property	\$5,495.00	\$5,495.00

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1 Luis	Fernando Montoya	, Jr.	Page 13 of 64 Case n	umber (if known)	
	Ducati 59	Who has an interest in the pr ■ Debtor 1 only	operty? Check one		laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
Year: 2	016	Debtor 2 only		Current value of the	Current value of the
Approximate	mileage:	Debtor 1 and Debtor 2 only		entire property?	portion you own?
Other inform	ation:	At least one of the debtors a	and another		
		☐ Check if this is communit (see instructions)	y property	\$9,668.00	\$9,668.00
		rVs and other recreational vehicles nal watercraft, fishing vessels, snowi			
5 Add the dollar pages you hav	value of the portion ye ve attached for Part 2.	ou own for all of your entries from Write that number here	Part 2, including any en	ntries for	\$104,051.00
	our Personal and House				
Do you own or h	ave any legal or equita	ble interest in any of the following	items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Examples:</i> Maj □ No		linens, china, kitchenware			
Yes. Descri	be				
	Household	d goods and furnishings			\$3,000.00
incl ■ No □ Yes. Descri Collectibles of Examples: Anti	uding cell phones, came be value ques and figurines; pain er collections, memorab	io, video, stereo, and digital equipme eras, media players, games atings, prints, or other artwork; books ilia, collectibles		·	ŕ
■ res. Descri	be				
	Collectible	es .			\$100.00
Examples: Spo	sports and hobbies orts, photographic, exerc sical instruments	ise, and other hobby equipment; bicy	cles, pool tables, golf clut	os, skis; canoes and ka	ayaks; carpentry tools;
Yes. Descri	be				
0. Firearms Examples: Pis ■ No	stols, rifles, shotguns, ar	mmunition, and related equipment			
☐ Yes. Descri	be				
1. Clothes Examples: Ev □ No	eryday clothes, furs, lea	ther coats, designer wear, shoes, ac	cessories		
Yes. Descri		Schedule A/B: Prop	perty		page

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

☐ Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

Case 6:17-bk-17316-MH	Doc 1 Filed 08/3	31/17 Entered 08/31/17 1	L0:15:43 Desc
Debtor 1 Luis Fernando Montoya, Jr.	Main Document	Page 15 of 64 Case number (if know	vn)
20. Government and corporate bonds and othe Negotiable instruments include personal chec Non-negotiable instruments are those you ca ■ No □ Yes. Give specific information about them Issuer name:	cks, cashiers' checks, promis	sory notes, and money orders.	
21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 4 No ☐ Yes. List each account separately. Type of account:	01(k), 403(b), thrift savings a Institution nam		ing plans
•	mondiam	С.	
 Security deposits and prepayments Your share of all unused deposits you have n Examples: Agreements with landlords, prepai 			panies, or others
■ NO □ Yes	Institution nam	ne or individual:	
23. Annuities (A contract for a periodic payment	of money to you, either for life	e or for a number of years)	
■ No □ Yes Issuer name and descri	otion.		
24. Interests in an education IRA, in an account 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1)		am, or under a qualified state tuition	program.
■ No □ Yes Institution name and de	scription. Separately file the r	ecords of any interests.11 U.S.C. § 521	(c):
25. Trusts, equitable or future interests in prop	perty (other than anything li	sted in line 1), and rights or powers	exercisable for your benefit
■ No □ Yes. Give specific information about them			
 Patents, copyrights, trademarks, trade sec Examples: Internet domain names, websites, No Yes. Give specific information about them 	proceeds from royalties and		
 27. Licenses, franchises, and other general int Examples: Building permits, exclusive license ■ No □ Yes. Give specific information about them 	es, cooperative association ho	oldings, liquor licenses, professional lice	enses
Money or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you			
■ No □ Yes. Give specific information about them, i	ncluding whether you already	filed the returns and the tax years	

29. **Family support** *Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

☐ Yes. Give specific information..

Debtor 1	Case 6:17-bk-17316-MH Luis Fernando Montoya, Jr.	Doc 1 Filed 08/ Main Document	/31/17 Entered 08/31/17 Page 16 of 64 Case number (if kn	
	ests in insurance policies inples: Health, disability, or life insurance	; health savings account (H	SA); credit, homeowner's, or renter's in	surance
	s. Name the insurance company of each Company name		Beneficiary:	Surrender or refund value:
If yo som ■ No	nterest in property that is due you fro u are the beneficiary of a living trust, exp eone has died. s. Give specific information			o receive property because
Exal ■ No	ns against third parties, whether or no mples: Accidents, employment disputes, s. Describe each claim			
■ No	r contingent and unliquidated claims of some some some some some some some some	of every nature, including	counterclaims of the debtor and rigi	hts to set off claims
■ No	inancial assets you did not already liss. Give specific information	st		
	I the dollar value of all of your entries Part 4. Write that number here			d \$8,020.00
Part 5:	Describe Any Business-Related Property Yo	ou Own or Have an Interest In	. List any real estate in Part 1.	
■ No.	u own or have any legal or equitable interes Go to Part 6. Go to line 38.	st in any business-related pro	perty?	
	Describe Any Farm- and Commercial Fishin you own or have an interest in farmland, list in		or Have an Interest In.	
	ou own or have any legal or equitable	interest in any farm- or co	ommercial fishing-related property?	

53. **Do you have other property of any kind you did not already list?** *Examples:* Season tickets, country club membership

■ No

Part 7:

☐ Yes. Go to line 47.

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

Describe All Property You Own or Have an Interest in That You Did Not List Above

\$0.00

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc

Page 17 of 64
Case number (if known) Main Document Debtor 1 Luis Fernando Montoya, Jr.

			· · · · · ·	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$272,000.00
56.	Part 2: Total vehicles, line 5	\$104,051.00		
57.	Part 3: Total personal and household items, line 15	\$4,600.00		
58.	Part 4: Total financial assets, line 36	\$8,020.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$116,671.00	Copy personal property total	\$116,671.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$388,671.00

Official Form 106A/B Schedule A/B: Property page 7 Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc

		Maii Doui	meni Paue io di	04
Fill in this infor	mation to identify your	case:		
Debtor 1	Luis Fernando M	ontoya, Jr.		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA	
Case number				
(if known)				☐ Che

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
14540 Arctic Fox Ave. Eastvale, CA 92880-1092 Riverside County	\$272,000.00		\$3,962.50	C.C.P. § 703.140(b)(5)	
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
Household goods and furnishings Line from Schedule A/B: 6.1	\$3,000.00		\$3,000.00	C.C.P. § 703.140(b)(3)	
Ellie Holli Geriedale A/D. V.1			100% of fair market value, up to any applicable statutory limit		
Collectibles Line from Schedule A/B: 8.1	\$100.00		\$100.00	C.C.P. § 703.140(b)(5)	
Ellie Holli Gollodale 77 B. G.T.			100% of fair market value, up to any applicable statutory limit		
Clothing Line from Schedule A/B: 11.1	\$800.00		\$800.00	C.C.P. § 703.140(b)(3)	
Ellie Holli Golledale A/D. 11.1			100% of fair market value, up to any applicable statutory limit		
Jewelry Line from Schedule A/B: 12.1	\$500.00	\$500.00		C.C.P. § 703.140(b)(4)	
Line nom Schedule A/D. 12.1			100% of fair market value, up to any applicable statutory limit		

Entered 08/31/17 10:15:43 Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Main Document Page 19 of 64 Luis Fernando Montoya, Jr. Debtor 1 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Dog C.C.P. § 703.140(b)(5) \$200.00 \$200.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit C.C.P. § 703.140(b)(5) Cash \$20.00 \$20.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking and savings account C.C.P. § 703.140(b)(5) \$8,000.00 \$8,000.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

3.	Are you	claiming a	homestead	exemption	of more	than	\$160,375?	?
----	---------	------------	-----------	-----------	---------	------	------------	---

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 - No
 - Yes

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc

		Main Document	Page 2	20 of 64		
Fill in this informat	ion to identify you	ur case:				
_	Luis Fernando					
	First Name	Middle Name La	st Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name La	ıst Name		-	
United States Bankr	uptcy Court for the	: CENTRAL DISTRICT OF CALIFOR	RNIA		_	
Case number						
(if known)					_	if this is an led filing
Official Faces	1000					J
Official Form						
Schedule D	: Creditors	S Who Have Claims Se	<u>:cured</u>	by Propert	У	12/15
		If two married people are filing together, bout, number the entries, and attach it to the				
1. Do any creditors ha	ve claims secured b	y your property?				
☐ No. Check th	is box and submit t	this form to the court with your other sch	edules. You	ı have nothing else t	to report on this form.	
Yes. Fill in all	of the information	below.				
Part 1: List All S	ecured Claims					
for each claim. If more	than one creditor has	more than one secured claim, list the creditor s a particular claim, list the other creditors in F ical order according to the creditor's name.		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 BMW Finance	cial Services	Describe the property that secures the c	claim:	\$44,621.00	\$27,625.00	\$16,996.00
Creditor's Name		2015 BMW 428i I4 Turbo 45,000				
Attn: Bankru	uptcy	miles				
Department Po Box 3608	ł	As of the date you file, the claim is: Chec	k all that			
Dublin, OH 4		apply. Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the debt?	? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		 An agreement you made (such as mortgough car loan) 	gage or secur	red		
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechan	ic's lien)			
At least one of the	debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim	relates to a	Other (including a right to offset)				
community debt	Opened					
	4/11/15					
Date debt was incurre	Last Active 7/17/17	Last 4 digits of account number	5841			
		_				
2.2 Chase Auto Creditor's Name	Finance	Describe the property that secures the c		\$24,427.00	\$24,098.00	\$329.00
National Bar	nkruptcy	2017 Subaru Crosstrek 3,500 m	illes			
Dept						
201 N Centra	al Ave Ms	As of the date you file, the claim is: Chec apply.	k all that			
Az1-1191 Phoenix, AZ	85004	☐ Contingent				
Number, Street, City		☐ Unliquidated				
		Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		 An agreement you made (such as mortgough car loan) 	gage or secur	red		
Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechan	ic's lien)			
At least one of the o		☐ Judgment lien from a lawsuit	•			

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 21 of 64

Debtor 1 Luis Fernando Montoya		Case number (if know)		
First Name Middle N	lame Last Name			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 4/15/17 Last Active 7/14/17	Last 4 digits of account number 1202			
2.3 Frdmroad Fin	Describe the property that secures the claim:	\$8,082.00	\$5,495.00	\$2,587.00
Creditor's Name	2017 KTM SX-350			
10605 Double R Blvd Reno, NV 89521	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
Hamber, Greek, Orly, State & Zip Gode	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or se car loan)	ecured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another Check if this claim relates to a	Judgment lien from a lawsuit			
community debt	☐ Other (including a right to offset)			
Opened 5/22/17 Last Active 7/14/17	Last 4 digits of account number 8358			
Harley Davidson		***	40.050.00	44 =0= 00
Financial Creditor's Name	Describe the property that secures the claim: 2016 Harley Davidson Roadster 250	\$10,064.00	\$8,359.00	\$1,705.00
	miles			
Attention: Bankruptcy Po Box 22048	As of the date you file, the claim is: Check all that apply.			
Carson City, NV 89721 Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Hamber, Greek, Orly, State & Zip Gode	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or secar loan)	ecured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 9/16/16 Last Active 08/17	Last 4 digits of account number 3712			
2.5 Navy Federal Credit Union	Describe the property that secures the claim:	\$536,075.00	\$544,000.00	\$0.00
Creditor's Name	14540 Arctic Fox Ave. Eastvale, CA			
Attn: Bankruptcy	92880-1092 Riverside County			
PO Box 3000	As of the date you file, the claim is: Check all that apply.			
Merrifield, VA 22119	Contingent			

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 22 of 64

Debtor 1 Luis Fernando Montoya	, Jr.	Case number (if know)						
First Name Middle N	ame Last Name							
Number, Street, City, State & Zip Code	☐ Unliquidated							
	☐ Disputed							
Who owes the debt? Check one.	Nature of lien. Check all that apply.							
■ Debtor 1 only	An agreement you made (such as mortgage	e or secured						
Debtor 2 only	car loan)							
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's	lien)						
At least one of the debtors and another Check if this claim relates to a	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)							
community debt								
Opened 11/14 Last Active 07/17	Last 4 digits of account number	3749						
2.6 Nissan Acceptance Co	Describe the property that secures the clair	n: \$102,317.00	\$85,237.00	\$17,080.00				
Creditor's Name	2016 Nissan GT-R 3,000 miles			<u> </u>				
	,							
Pob 660366	As of the date you file, the claim is: Check all	that						
Dallas, TX 75266	apply. Contingent							
Number, Street, City, State & Zip Code	☐ Unliquidated							
	☐ Disputed							
Who owes the debt? Check one.	Nature of lien. Check all that apply.							
Debtor 1 only	An agreement you made (such as mortgage	e or secured						
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	car loan) ☐ Statutory lien (such as tax lien, mechanic's lien)							
At least one of the debtors and another	☐ Judgment lien from a lawsuit							
Check if this claim relates to a community debt	Other (including a right to offset)							
Opened								
1/24/17								
Last Active Date debt was incurred 08/17	Last 4 digits of account number	0001						
2.7 Volkswagen Credit, Inc	Describe the property that secures the clair	n: \$13,909.00	\$9,668.00	\$4,241.00				
Creditor's Name	2016 Ducati 959 500 miles							
Ро Вох 3	As of the date you file, the claim is: Check all apply.	that						
Hillsboro, OR 97123	Contingent							
Number, Street, City, State & Zip Code	☐ Unliquidated							
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.							
Debtor 1 only	_							
Debtor 2 only	 An agreement you made (such as mortgage car loan) 	e or secured						
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)						
At least one of the debtors and another	☐ Judgment lien from a lawsuit							
☐ Check if this claim relates to a community debt	Other (including a right to offset)							
Opened								
6/18/16								
Last Active Date debt was incurred 7/14/17	Last 4 digits of account number	2403						
	_							

Add the dollar value of your entries in Column A on this page. Write that number here:

\$739,495.00

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 23 of 64

Debtor 1	Luis Fernando Montoya, Jr.			Case number (if know)	
	First Name	Middle Name	Last Name		
	the last page of your fo at number here:	orm, add the dollar value to	tals from all pages.	\$739,495.0	0

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Ca	26 0.11-0K-11210-W		ocument Page 24	of 6/1	1 10.13	.43	Desc	
Fill in this info	rmation to identify your cas		N.IIII	71 V. -				
Debtor 1	Luis Fernando Mont	ova .lr						
200.0.	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States E	Bankruptcy Court for the: C	ENTRAL DISTRI	CT OF CALIFORNIA					
Case number								
(if known)							if this is ar ed filing	1
Official Fo	rm 106E/F							
	E/F: Creditors Who	Have Uns	ecured Claims				12/1	5
any executory co Schedule G: Exe Schedule D: Cred eft. Attach the C	entracts or unexpired leases that cutory Contracts and Unexpired ditors Who Have Claims Secure	t could result in a d I Leases (Official Fo d by Property. If mo	vith PRIORITY claims and Part 2 fo claim. Also list executory contract orm 106G). Do not include any cre ore space is needed, copy the Part mation to report in a Part, do not f	s on Schedule A/B: F ditors with partially s you need, fill it out, i	roperty (Of ecured clai number the	ficial Fori ms that a entries ir	m 106A/B) re listed in the boxes	and on on s on the
Part 1: List	All of Your PRIORITY Unse	cured Claims						
1. Do any cred	itors have priority unsecured cl	aims against you?						
☐ No. Go to	Part 2.							
Yes.								
identify what possible, list	type of claim it is. If a claim has b	oth priority and nonp ccording to the credit	than one priority unsecured claim, lis riority amounts, list that claim here a tor's name. If you have more than tw her creditors in Part 3.	nd show both priority a	nd nonpriori	ty amount	s. As much	as
(For an expla	anation of each type of claim, see	the instructions for th	nis form in the instruction booklet.)					
				Total claim	Priority amount		Nonpriori amount	ty
	hise Tax Board	Last 4 dig	jits of account number	\$0.00		\$0.00		\$0.00
BANK	Creditor's Name (RUPTCY SECTION MS A BOX 2952	340 When wa	s the debt incurred?					
Sacra	mento, CA 95812-2952							
	Street City State Zlp Code	As of the	date you file, the claim is: Check a	all that apply				
_	red the debt? Check one.	☐ Contin	gent					
■ Debtor	1 only	☐ Unliqu	idated					
☐ Debtor 2	2 only	☐ Disput	ed					
☐ Debtor	1 and Debtor 2 only	Type of P	RIORITY unsecured claim:					
☐ At least	one of the debtors and another	☐ Domes	stic support obligations					
☐ Check i	f this claim is for a community	debt Taxes	and certain other debts you owe the	government				
	n subject to offset?		for death or personal injury while yo	•				
■ No		☐ Other.						
☐ Yes			. ,					

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 25 of 64

Debte	or 1 Luis Fernando Montoya, Jr.	———————	Case number (if know)				
2.2	Internal Revenue Service	Last 4 digits of account number	\$0.00	\$0.00 \$0	.00		
	Priority Creditor's Name P.O. Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	:				
	☐ At least one of the debtors and another	☐ Domestic support obligations					
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you	owe the government				
	Is the claim subject to offset?	☐ Claims for death or personal injury	· ·				
	■ No	☐ Other. Specify					
	☐ Yes						
Part	2: List All of Your NONPRIORITY Unsecu	ıred Claims					
3. D	o any creditors have nonpriority unsecured claim						
	No. You have nothing to report in this part. Submit	this form to the court with your other sche	edules				
_	<u> </u>	,					
•	Yes.						
u th	ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each c nan one creditor holds a particular claim, list the other art 2.	laim. For each claim listed, identify what t	type of claim it is. Do not list claims already	included in Part 1. If more	;		
				Total claim			
4.1	Capital One	Last 4 digits of account number	8396	\$2,147.	.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30253	When was the debt incurred?	Opened 6/16/09 Last Active 08/17				
	Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	As of the date you me, the oldmi	S. Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	_ '					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did no	ot			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	a plane, and other similar debts				
	■ No		_				
	☐ Yes	Other Specify Credit Card	1				

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43

Page 26 of 64 Main Document Debtor 1 Luis Fernando Montoya, Jr. 4.2 \$647.00 Capital One Last 4 digits of account number 7055 Nonpriority Creditor's Name Attn: Bankruptcy Opened 9/25/07 Last Active Po Box 30253 When was the debt incurred? 08/17 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **Capital One** Last 4 digits of account number 6380 \$2,083.00 Nonpriority Creditor's Name Attn: Bankruptcv Opened 6/30/09 Last Active Po Box 30253 When was the debt incurred? 08/17 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 **Capital One** Last 4 digits of account number 8446 \$2,341.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 6/08/12 Last Active Po Box 30253 When was the debt incurred? 08/17 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.

Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43

Page 27 of 64 Case number (if know) Main Document Debtor 1 Luis Fernando Montoya, Jr. 4.5 \$5,807.00 **Chase Card** Last 4 digits of account number 1005 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 7/11/14 Last Active Po Box 15298 When was the debt incurred? 08/17 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.6 Credit One Bank Na Last 4 digits of account number 4543 \$2,087.00 Nonpriority Creditor's Name Opened 1/06/08 Last Active Po Box 98872 When was the debt incurred? 08/17 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Credit Card** Other, Specify 4.7 Credit One Bank Na Last 4 digits of account number 1943 \$652.00 Nonpriority Creditor's Name Opened 11/13/14 Last Active Po Box 98872 When was the debt incurred? 07/17 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Credit Card

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc

Page 28 of 64 Case number (if know) Main Document Debtor 1 Luis Fernando Montoya, Jr.

4.8	Dell Financial Services	Last 4 digits of account number	9607	\$1,954.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 81577 Austin, TX 78708	When was the debt incurred?	Opened 1/19/16 Last Active 7/29/17				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed	Labet o				
	At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not				
	_	Debts to pension or profit-sharir	a plane, and other similar debta				
	■ No						
	Yes	Other. Specify Charge Ac	count				
4.9	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	9691	\$1,100.00			
	PO Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 3/11/15 Last Active 7/14/17				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	Other. Specify Credit Card					
4.1	Dsnb Bloomingdales	Last 4 digits of account number	3581	\$1,142.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 8053	When was the debt incurred?	Opened 10/05/13 Last Active 08/17				
	Mason, OH 45040 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	debt					
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts				
	□ Yes	Other. Specify Charge Ac					
	_ 165	Other. Specify					

Entered 08/31/17 10:15:43 Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17

Page 29 of 64 Case number (if know) Main Document Debtor 1 Luis Fernando Montoya, Jr. 4.1 **Navy Federal Credit Union** 6805 \$14,393.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/14 Last Active PO Box 3000 When was the debt incurred? 08/17 Merrifield, VA 22119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Check Credit Or Line Of Credit 4.1 **Navy Federal Credit Union** 7306 \$9,493.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Attn: Bankruptcy Opened 12/13 Last Active PO Box 3000 When was the debt incurred? 08/17 Merrifield, VA 22119 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.1 Rocio Garcia \$21,000.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 2134 S. Standard Ave. When was the debt incurred? Santa Ana, CA 92707 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

Other. Specify Loan

☐ Yes

Page 30 of 64 Case number (if know) Main Document Debtor 1 Luis Fernando Montoya, Jr.

4.1 4	Synchrony Bank/Amazon	Last 4 digits of account number	1494	\$2,105.00			
	Nonpriority Creditor's Name	_	Omenad 2/40/40 Leet Active				
	Attn: Bankruptcy Po Box 956060	When was the debt incurred?	Opened 3/18/16 Last Active 7/16/17				
	Orlando, FL 32896	mon was the dest meaned.					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Charge Acc	count				
4.1	U.S. Dept Of Ed/Great Lakes	Last 4 digits of account number	8581	\$38,816.00			
5	Nonpriority Creditor's Name			400,010.00			
	Attn: Bankruptcy		Opened 1/20/11 Last Active				
	2401 International Lane	When was the debt incurred?	07/17				
	Madison, WI 53704 Number Street City State Zlp Code						
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	an anat app.				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only						
	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify					
		Educationa	l				
4.1 6	Vangaurd University	Last 4 digits of account number	9543	\$6,000.00			
	Nonpriority Creditor's Name 55 Fair. Drive Costa Mesa, CA 92626	When was the debt incurred?	2017				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	or 2 only					
	Debtor 1 and Debtor 2 only	Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify					

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Entered 08/31/17 10:15:43 Desc Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Page 31 of 64 Case number (if know) Main Document

Debtor 1 Luis Fernando Montoya, Jr.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 38,816.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 72,951.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 111,767.00

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc

		WIGHT LAUGH	mem Faue 37 OLO	4
Fill in this infor	mation to identify your	case:		
Debtor 1	Luis Fernando M	ontoya, Jr.		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		CENTRAL DISTRICT O	F CALIFORNIA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for	
2.1	BMW Financial Services Attn: Bankruptcy Department Po Box 3608 Dublin, OH 43016	Vehicle Ioan.	
2.2	Chase Auto Finance National Bankruptcy Dept 201 N Central Ave Ms Az1-1191 Phoenix, AZ 85004	Vehicle Ioan.	
2.3	Navy Federal Credit Union Attention: Bankruptcy PO Box 3000 Merryfield, VA 22119	Mortgage.	
2.4	Nissan Acceptance Co Pob 660366 Dallas, TX 75266	Vehicle Ioan.	

		Main Docum	ent Page 3.	3 01 64	
Fill in th	is information to identify your	case:			
Debtor 1	Luis Fernando Mo	ontoya, Jr.			
	First Name	Middle Name	Last Name		
Debtor 2	Transition of the second of th	ACT III AT			
(Spouse if, t	iling) First Name	Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	CENTRAL DISTRICT OF	CALIFORNIA		
_					
Case nur (if known)	nber			☐ Check if this is an	
,				amended filing	
Officia	al Form 106H				
Scha	dule H: Your Cod	ahtars		12/1	15
JUITE	dule II. Toul Cou	EDIOI 3		12/1	13
neople an ill it out, your nam 1. Do	re filing together, both are equivand number the entries in the lie and case number (if known) by you have any codebtors? (If you have any codebtors?)	ally responsible for supply boxes on the left. Attach the Answer every question. You are filing a joint case, do lived in a community prop Nevada, New Mexico, Puert	ing correct information Additional Page to not list either spouse perty state or territory to Rico, Texas, Washi	y? (Community property states and territories include	age,
	=				
	■ No				
	☐ Yes.				
	In which community state	or territory did you live?	-NONE-	. Fill in the name and current address of that perso	n.
	Name of your spouse, former spo Number, Street, City, State & Zip	ouse, or legal equivalent Code			
in lir Forn	ne 2 again as a codebtor only i n 106D), Schedule E/F (Official Column 2.	f that person is a guaranto	r or cosigner. Make s	if your spouse is filing with you. List the person sh sure you have listed the creditor on Schedule D (Off 6G). Use Schedule D, Schedule E/F, or Schedule G	ficial to fill
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The creditor to whom you owe the de Check all schedules that apply:	ebt
3.1	Denise Gumenberg			■ Schedule D, line2.1	
	14540 Arctic Fox. Ave.			☐ Schedule E/F, line	
	Eastvale, CA 92880			☐ Schedule C/1 , line	
				BMW Financial Services	
3.2	Denise Gumenberg			■ Schedule D, line	
	14540 Arctic Fox. Ave. Eastvale, CA 92880			☐ Schedule E/F, line	
	Lustvais, UA 32000			☐ Schedule G	
				Chase Auto Finance	

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 34 of 64

Case number (if known)

	Additional Page to List More Codebtors Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.3	Denise Gumenberg 14540 Arctic Fox. Ave. Eastvale, CA 92880	■ Schedule D, line □ Schedule E/F, line □ Schedule G Harley Davidson Financial
3.4	Denise Gumenberg 14540 Arctic Fox. Ave. Eastvale, CA 92880	■ Schedule D, line Schedule E/F, line Schedule G Nissan Acceptance Co
3.5	Denise Gumenberg 14540 Arctic Fox. Ave. Eastvale, CA 92880	■ Schedule D, line □ Schedule E/F, line □ Schedule G Volkswagen Credit, Inc

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 35 of 64

Eill	in this information t	to identify your ca	950.								
	otor 1		do Montoya, Jr.								
	otor 2 ouse, if filing)					_					
Uni	ted States Bankrup	otcy Court for the	CENTRAL DISTRICT	OF CALIFORNIA							
	se number nown)						□ A		ed filing ent showir	ng postpetition following date:	
0	fficial Form	106I					ī	1M / DD/ Y	YYY		
S	chedule I:	Your Inco	ome								12/15
sup spo atta	plying correct info use. If you are sep ch a separate she tt 1: Describ	ormation. If you parated and you et to this form. (sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your th you, do not inclu	spouse i ude inforr	s livi natio	ng with n about	you, incl	ude infori ouse. If m	mation about ore space is	your needed,
1.	Fill in your empl information.	oyment		Debtor 1				Debtor 2	or non-f	iling spouse	
	If you have more than one job,		Employment status	■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional	,	☐ Not employed				☐ Not e	mployed			
	employers.	222222	Occupation	Software Sales	;						
	Include part-time, self-employed wo		Employer's name	Winshuttle, LL	С						
	Occupation may i or homemaker, if		Employer's address	19820 North Cr Suite 200 Bothell, WA 98		cway	' ,				
			How long employed the	nere? 2 years	S			_			
Par	t 2: Give De	tails About Mon	thly Income					_			
Esti spou	mate monthly incouse unless you are	ome as of the da separated.	ate you file this form. If y	·	·	mplo		that perso	on on the l	·	Ū
2.			ry, and commissions (becalculate what the month)		2.	\$_	10	,250.00	\$	N/A	
3.	Estimate and lis	t monthly overti	me pay.		3.	+\$_	3	,537.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	ue 2 + line 3.		4.	\$	13,78	87.00	\$	N/A	ı

Debtor	1 Luis Fernando Montoya, Jr.		Case	number (if k	nown)					
			For Debtor 1			Fo	For Debtor 2 or			
,	Conviling 4 have	4.	\$	40.70	7.00		n-filing s	•		
•	Copy line 4 here	4.	Φ_	13,78	7.00	\$_		N/A	<u> </u>	
5. L	ist all payroll deductions:									
5	a. Tax, Medicare, and Social Security deductions	5a.	\$	3,840	6.00	\$_		N/A		
	b. Mandatory contributions for retirement plans	5b.	\$_		0.00	\$_		N/A		
	c. Voluntary contributions for retirement plans	5c.	\$_		0.00	\$_		N/A		
	d. Required repayments of retirement fund loans	5d.	\$_		0.00	\$_		N/A		
_	e. Insurance f. Domestic support obligations	5e. 5f.	\$_ \$		0.00	\$_ \$		N/A		
	g. Union dues	5g.	\$ -		0.00	\$ -		N/A		
	h. Other deductions. Specify: Dental Insurance	5h			0.00			N/A		
	401k Contribution		\$		0.00	\$		N/A		
	Health Savings Account		\$	80	0.00	\$		N/A		
	Medical Insurance		\$	23	5.00	\$_		N/A		
	Vision Insurance		\$_	•	4.00	\$_		N/A	<u> </u>	
6. A	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	4,31	5.00	\$_		N/A	<u>A</u>	
7. C	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	9,47	2.00	\$_		N/A	<u>A</u>	
	ist all other income regularly received: a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$		0.00	\$		N/A	٨	
8	b. Interest and dividends	8b.	\$_		0.00	\$-		N/A		
8	 Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive 	8c. 8d. 8e.	\$_ \$_ \$_		0.00 0.00 0.00	\$_ \$_ \$_		N/A N/A	4	
8	Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: g. Pension or retirement income	ece 8f. 8g.	\$_ \$		0.00 0.00	\$ \$		N/A		
	Contribution from Debtor's								_	
8	h. Other monthly income. Specify: girlfriend for half the mortgage	8h	+ \$_	2,020	0.00	+ \$_		N/A	4	
9.	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,020	0.00	\$_		N	/A	
10. C	Calculate monthly income. Add line 7 + line 9.	10. \$	1	1,492.00	+ \$		N/A	= \$	11,492.00	
	dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-	1,402.00			107	Ľ	11,402.00	
 0 	state all other regular contributions to the expenses that you list in <i>Schedu</i> include contributions from an unmarried partner, members of your household, you ther friends or relatives. To not include any amounts already included in lines 2-10 or amounts that are not specify:	ur deper		•		•			0.00	
V	 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 							\$	11,492.00	
								Comb month	oined hly income	
	o you expect an increase or decrease within the year after you file this for No.									
	Yes. Explain: Debtor is paid a base salary of \$10,000 per mor Internet and office phone. He also receives collaboration averaged on line 3 of Schedule I.									

Fill	in this information to identify your case:				
Deb	btor 1 Luis Fernando Montoya, Jr.		Che	ck if this is:	
	btor 2			An amended filing A supplement show 13 expenses as of	ving postpetition chapter
``		DAH A		·	
Unit	ited States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFOR	RNIA		MM / DD / YYYY	
	se numberknown)				
	fficial Form 106J				
	chedule J: Your Expenses	filian tanathan ha	4h		12/1
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fomber (if known). Answer every question.				
Par	rt 1: Describe Your Household Is this a joint case?				
١.	■ No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses f</i>	for Separate Housel	hold of Deb	tor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				□ Yes □ No
					☐ Yes
					□ No
					Yes
					□ No
3.	Do your expenses include ■ No				☐ Yes
0.	expenses of people other than yourself and your dependents?				
Est exp	rt 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless yo penses as of a date after the bankruptcy is filed. If this is a supple plicable date.				
the	clude expenses paid for with non-cash government assistance if ye value of such assistance and have included it on <i>Schedule I: Yo</i> fficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. Incompayments and any rent for the ground or lot.	clude first mortgage	4. \$	S	4,038.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	3	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		100.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hom 	ne equity loans	4d. \$ 5. \$		0.00
o.	reactional mortgage payments for your residence, such as non-	io oddity idalio	J. (,	v.vv

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 38 of 64

Deb	tor 1 Luis Fernando Montoya, Jr.	Case num	nber (if known)	
6.	Utilities:			
٥.	6a. Electricity, heat, natural gas	6a.	\$	250.00
	6b. Water, sewer, garbage collection	6b.		150.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d. Other Specify: Cable/Internet	6d.	\$	240.00
7.	Food and housekeeping supplies		·	350.00
8.	Childcare and children's education costs	8.	·	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	225.00
-	Personal care products and services	10.	•	0.00
	Medical and dental expenses	11.	·	50.00
	Transportation. Include gas, maintenance, bus or train fare.			30.00
	Do not include car payments.	12.	\$	400.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	1,300.00
	Insurance.			<u>,</u>
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.		65.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	81.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	 16.	\$	0.00
17.	Installment or lease payments:		<u> </u>	<u> </u>
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify: 2017 Subaru Payment	17c.	\$	355.00
	17d. Other. Specify:	17d.	·	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as		·	
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	600.00
	Specify: Child support paid for debtor's daughter (not court ordered)	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schee	dule I: Yo	our Income.	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
21.	Other: Specify:	21.	+\$	0.00
22	Coloulate your monthly evenence			
22.	Calculate your monthly expenses 22a. Add lines 4 through 21.		•	0.404.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	8,404.00
			\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	8,404.00
23.	Calculate your monthly net income.		_	
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		11,492.00
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	8,404.00
	23c. Subtract your monthly expenses from your monthly income.	22	Φ.	3,088.00
	The result is your <i>monthly net income</i> .	23c.	\$	3,000.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

☐ Yes.

Explain here: Debtor's girlfriend pays the other half of the mortgage in the amount of \$2,020.00. She is on title to the property and a co-borrower on the loan.

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 39 of 64

Fill in this infor	mation to identify your	case:			
Debtor 1	Luis Fernando M	ontoya, Jr.			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	CENTRAL DISTRICT (OF CALIFORNIA		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	m 106Dec				
	-	n Individua	l Dobtorio S	ahadulaa	
Declara	tion About a	n Individua	Deptor S 3	chedules	12/15
years, or both. 1	y or property by fraud in 18 U.S.C. §§ 152, 1341, 1		kruptcy case can resul	t in fines up to \$250,000	0, or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an atto	rney to help you fill out	bankruptcy forms?	
— Na					
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
				Declaration,	and Signature (Cilician Cilin 119)
	alty of perjury, I declare re true and correct.	that I have read the sun	nmary and schedules fi	led with this declaration	n and
X /s/ Lui	s Fernando Montoya	, Jr.	X		
Luis F	ernando Montoya, Jr ure of Debtor 1	•	Signature of	of Debtor 2	
ě.					

Date _____

Date August 31, 2017

Fi	ll in this inform	ation to identify you	r case:					
De	ebtor 1	Luis Fernando N						
De	ebtor 2	First Name	Middle Name	Lá	ast Name			
1 '	oouse if, filing)	First Name	Middle Name	La	ast Name			
Ur	nited States Ban	kruptcy Court for the:	CENTRAL DISTRICT OF	CALIFO	RNIA			
Ca	ase number							
(if I	known)					[ck if this is an ended filing
							amo	maca ming
O	fficial For	m 107						
			Affairs for Individ	duals	Filing for B	ankruptcy		4/1
Be	as complete ar	nd accurate as poss	ible. If two married people a	are filing	together, both are	equally responsible for		
		ore space is needed,). Answer every que	attach a separate sheet to stion.	this form	n. On the top of an	y additional pages, write	your n	name and case
Pa	art 1: Give De	etails About Your Ma	arital Status and Where You	ı Lived B	efore			
1.		current marital statu						
••	_	ourrent martar state						
	✓ Married✓ Not marr	ied						
_			lived annual are other than					
2.	During the la	st 3 years, nave you	lived anywhere other than	wnere yo	ou live now?			
	□ No							
	■ Yes. List	all of the places you l	lived in the last 3 years. Do no	ot include	where you live nov	<i>I</i> .		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there		Debtor 2 Prior Ad	ldress:	_	Dates Debtor 2 lived there
	178 Full mo		From-To:		☐ Same as Debtor	1		☐ Same as Debtor 1
	Irvine, CA 9	92618	08/2012 - 04/2	014			F	From-To:
3. sta			ver live with a spouse or leg lifornia, Idaho, Louisiana, Ne					
	■ No							
	_	ke sure you fill out Sci	hedule H: Your Codebtors (O	fficial For	m 106H).			
Pa	art 2 Explain	n the Sources of You	ır Income					
4.	Did you have	amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all busine	sses, including part	-time activities.	calenda	ar years?
	□ No							
	_	in the details.						
			Debtor 1			Debtor 2		
			Sources of income	Gross	s income	Sources of income		Gross income
			Check all that apply.	(befor exclus	e deductions and sions)	Check all that apply.		(before deductions and exclusions)
Fr	om Januarv 1 d	of current year until	Woods sometiming		\$96,512.00	☐ Wages, commission		,
		I for bankruptcy:	■ Wages, commissions, bonuses, tips		+ 3 0,0 1 = 100	bonuses, tips	,	
			☐ Operating a business			☐ Operating a busines	38	

Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Case 6:17-bk-17316-MH Page 41 of 64 Case number (if known) Main Document

Debtor 1 Luis Fernando Montoya, Jr.

				Debtor 1		Debtor 2			
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
	r last calen anuary 1 to	dar year: December :	31, 2016)	■ Wages, commissions, bonuses, tips	\$178,716.00	☐ Wages, combonuses, tips	missions,		
				☐ Operating a business		☐ Operating a	business		
		dar year bet December :		■ Wages, commissions, bonuses, tips	\$129,318.00	☐ Wages, combonuses, tips	missions,		
				☐ Operating a business		☐ Operating a	business		
	List each	•	ne gross inco	e and you have income that you me from each source separa		·			
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)	
Pa	rt 3: List	Certain Pa	yments You	Made Before You Filed for	,				
6.	□ No.	Neither De individual puring the No. Yes	ebtor 1 nor D rimarily for a 90 days befo Go to line 7 List below of paid that cro not include o adjustment	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the on 4/01/19 and every 3 year	Imer debts. Consumer debtald purpose." d you pay any creditor a total d a total of \$6,425* or more into the for domestic support oblighis bankruptcy case. s after that for cases filed on	Il of \$6,425* or mo in one or more pay gations, such as ch	re? /ments and t nild support a	he total amount you and alimony. Also, do	
	■ Yes.			r both have primarily consure you filed for bankruptcy, di		l of \$600 or more?	,		
		□ No.	Go to line 7						
		■ Yes	include pay	each creditor to whom you pai ments for domestic support o this bankruptcy case.					
	Creditor'	s Name and	l Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this	payment for	
	Nationa	Auto Finan I Bankrupt	cy Dept	monthly payn of \$355		\$24,427.00	☐ Mortga	ge	
	201 N C	entrai Ave	Ms Az1-11	ษา			п		

Phoenix, AZ 85004

☐ Credit Card

☐ Other__

☐ Loan Repayment ☐ Suppliers or vendors

Entered 08/31/17 10:15:43 Desc Doc 1 Filed 08/31/17 Case 6:17-bk-17316-MH Page 42 of 64 Case number (if known) Main Document

Debtor 1 Luis Fernando Montoya, Jr.

Credito	or's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Pob 6	n Acceptance Co 60366 c, TX 75266	monthly payments of \$1,735.00.	\$5,211.00	\$102,317.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
Attn: I Po Bo	Financial Services Bankruptcy Department x 3608 n, OH 43016	monthly payments of \$843.00	\$2,529.00	\$44,621.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
Attent Po Bo	v Davidson Financial ion: Bankruptcy x 22048 n City, NV 89721	montly payments of \$239.00	\$717.00	\$10,064.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
Attent Po Bo	Federal ion: Bankruptcy x 3000 field, VA 22119	monthly payments of \$4,038.00	\$12,144.00	\$536,075.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
Insiders of which		rtners; relatives of any ger control, or owner of 20% of	neral partners; partners or more of their voting	erships of which yo g securities; and ar	u are a general partner; corporations ny managing agent, including one for
☐ Ye	s. List all payments to an insider.				
Insider	's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
insider? Include	I year before you filed for bankrupto? payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a debt that benefited an
■ No Ye:	s. List all payments to an insider				
	's Name and Address	Dates of payment	Total amount	Amount you	Reason for this payment

7.

8.

paid

still owe

Include creditor's name

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Page 43 of 64 Case number (if known) Main Document

Debtor 1 Luis Fernando Montoya, Jr.

Pa	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures			
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.				
	■ No □ Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency	Status of th	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, foreclosed	d, garnished, attached	I, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.				
	Creditor Name and Address	Describe the Property		Date	Value of the property
		Explain what happene	d		
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment became No		cluding a bank or financial in:	stitution, set off any a	mounts from your
	Yes. Fill in the details.	5 " 4 " 4		D ()	
	Creditor Name and Address	Describe the action the	e creditor took	Date action was taken	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at		erty in the possession of an	assignee for the bene	efit of creditors, a
	■ No				
	☐ Yes				
Pa	tt 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup	tcy, did you give any gift	s with a total value of more t	han \$600 per person	?
	No				
	Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankrup	tcy, did you give any gift	s or contributions with a tota	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or cont	ribution.			
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what yo	u contributed	Dates you contributed	Value
	St. Mary 12686 Bristol Ave Santa Ana, CA 92707	monthly tithes o	of \$1,300.00	monthly	\$1,300.00

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Main Document Page 44 of 64 Debtor 1 Case number (if known) Luis Fernando Montoya, Jr. Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Date payment Description and value of any property Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Law Offices of Anthony B. Vigil, APC Attorney Fees: \$2,000.00. 08/2017 \$2,410.00 27201 Puerta Real, Suite 300 Court filing fee, credit report, credit Mission Viejo, CA 92691 counseling courses: \$410.00. anthony@vigillawgroup.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred Address or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

П Yes. Fill in the details.

Person Who Received Transfer Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you

Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Nο

Yes. Fill in the details.

Name of trust Description and value of the property transferred **Date Transfer was** made

Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Case 6:17-bk-17316-MH

Main Document

Debtor 1 Luis Fernando Montoya, Jr.

Page 45 of 64 Case number (if known)

Par	8: List of Certain Financial Accounts, In	strum	nents, Safe Depos	it Boxes, and St	orage Un	its		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or oth	ner financial acco	unts; certificates	of depos			
	Yes. Fill in the details.	•	4.4.11.514.5.5	T (D-1		Last balance
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		t 4 digits of ount number	Type of accordinstrument	unt or	Date account was closed, sold, moved, or transferred		Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year I	before you filed fo	or bankruptcy, a	ny safe de	eposit box or other depos	sitor	y for securities,
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had ac Address (Number, State and ZIP Code)		Describe	e the contents		Do you still have it?
22.	Have you stored property in a storage unit	or pla	ice other than you	ır home within 1	year befo	ore you filed for bankrupt	су?	
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, State and ZIP Code)		Describe	e the contents		Do you still have it?
Par	9: Identify Property You Hold or Contro	l for S	omeone Else					
23.	Do you hold or control any property that so for someone.	omeor	ne else owns? Inc	lude any proper	ty you bo	rrowed from, are storing	for,	or hold in trust
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)		Where is the pro (Number, Street, City, Code)		Describe	e the property		Value
Par	10: Give Details About Environmental Inf	orma	tion					
For	he purpose of Part 10, the following definit	ions a	apply:					
	Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of thes	he air	r, land, soil, surfa	ce water, ground				
	Site means any location, facility, or propert to own, operate, or utilize it, including disp	-	-	environmental l	law, whet	her you now own, operat	e, or	utilize it or used
	Hazardous material means anything an enhazardous material, pollutant, contaminant	/ironn	nental law defines	as a hazardous	waste, h	azardous substance, toxi	ic su	ıbstance,
Rep	ort all notices, releases, and proceedings th	at yo	u know about, reç	ardless of wher	they occ	urred.		
24.	Has any governmental unit notified you that	ıt you	may be liable or p	ootentially liable	under or	in violation of an environ	mer	ntal law?
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)		Governmental u Address (Number,			ronmental law, if you v it		Date of notice

	C	ase 6.17-bk-17316-MH	Main Document Page 46	nereu 06/3 i of 64	31/17 10.15.43	Desc
Deb	otor 1 <u>L</u>	uis Fernando Montoya, Jr.		of 64 Case number (i	if known)	
25.	Have yo	ou notified any governmental unit o	f any release of hazardous material?			
	■ No	s. Fill in the details.				
	Name o		Governmental unit	Environme	ental law, if you	Date of notice
		SS (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)		man lan, n you	
26.	Have yo	ou been a party in any judicial or ad	ministrative proceeding under any envi	onmental law?	Include settlements	and orders.
	■ No					
	☐ Ye	s. Fill in the details.				
	Case T		Court or agency Name	Nature of the o	case	Status of the case
	Case IV	unibei	Address (Number, Street, City, State and ZIP Code)			Case
Par	t 11: G	ive Details About Your Business or	Connections to Any Business			
27	Within 4	L vears before you filed for bankrun	otcy, did you own a business or have an	v of the followi	ng connections to ar	v husiness?
	_	,	in a trade, profession, or other activity,	•	•	y business.
					or part time	
			pany (LLC) or limited liability partnershi	p (LLP)		
		A partner in a partnership				
		An officer, director, or managing ex	xecutive of a corporation			
		An owner of at least 5% of the voting	ng or equity securities of a corporation			
	■ No	. None of the above applies. Go to	Part 12.			
	☐ Ye	s. Check all that apply above and fil	II in the details below for each business	<u>-</u>		
		ss Name	Describe the nature of the business		Identification number	
	Addres (Number,	SS Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not in	clude Social Security	number or ITIN.
				Dates bus	siness existed	
28.		2 years before you filed for bankrup ons, creditors, or other parties.	tcy, did you give a financial statement t	o anyone abou	t your business? Inc	lude all financial
	■ No					
	_	s. Fill in the details below.				
	Name		Date Issued			
	Addres (Number,	SS Street, City, State and ZIP Code)				
Par	t 12: Si	ign Below				
are t	true and	correct. I understand that making a	nancial Affairs and any attachments, and false statement, concealing property, (or obtaining mo	oney or property by fr	
		152, 1341, 1519, and 3571.	\$250,000, or imprisonment for up to 20	years, or botti.		
		rnando Montoya, Jr.	Olavarian (D.L.)			
		ındo Montoya, Jr. f Debtor 1	Signature of Debtor 2			
Dat	e Aug	ust 31, 2017	Date			
Did	you atta	ch additional pages to Your Statem	ent of Financial Affairs for Individuals F	iling for Bankri	uptcy (Official Form 1	107)?
■ N	lo					
ПΥ	es					
Did :		or agree to pay someone who is no	ot an attorney to help you fill out bankru	ptcy forms?		
		e of Person . Attach the <i>Bankr</i> i	uptcy Petition Preparer's Notice, Declaration	n, and Signatur	e (Official Form 119)	
	al Form 10		nent of Financial Affairs for Individuals Filing		- (5	page 7

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document

Page 47 of 64 Case number (if known) Debtor 1 Luis Fernando Montoya, Jr.

Case 6:17-bk-17316-MH

Entered 08/31/17 10:15:43 Doc 1 Filed 08/31/17

Page 48 of 64

B2030 (Form 2030) (12/15)

Main Document United States Bankruntey Court

	Central District of California								
In	re Luis Fernando Montoya, Jr.		Case No.						
		Debtor(s)	Chapter	13					
	DISCLOSURE OF COMPEN	SATION OF ATTOR	RNEY FOR DE	BTOR(S)					
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	o me, for services rendered or to					

be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$ 5,000.00 Prior to the filing of this statement I have received \$ 2,000.00 Balance Due 3,000.00 2. The source of the compensation paid to me was: Debtor ☐ Other (specify): 3. The source of compensation to be paid to me is: Debtor ☐ Other (specify): ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. 4. ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: 5. a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

6.

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding. Preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. Representation of debtors in any other adversary proceeding or motion.

CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. August 31, 2017 /s/ Anthony B. Vigil, Esq. Anthony B. Vigil, Esq. Date Signature of Attorney Law Offices of Anthony B. Vigil, APC 27201 Puerta Real, Suite 300 Mission Viejo, CA 92691 949-432-4808 Fax: 949-432-4804 anthony@vigillawgroup.com Name of law firm

Fill in this information to identify your case:					
Debtor 1	Luis Fernando Monte	oya, Jr.			
Debtor 2 (Spouse, if filing)					
United States B	United States Bankruptcy Court for the: Central District of California				
Case number (if known)					

Check as directed in lines 17 and 21:						
	According to the calculations required by this Statement:					
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	 Disposable income is determined under 11 U.S.C. § 1325(b)(3). 					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	1: Calculate Your Aver	rage Monthly Income							
1.	What is your marital and fi	ling status? Check one of	nly.						
	■ Not married. Fill out Col	umn A, lines 2-11.							
	☐ Married. Fill out both Co	lumns A and B, lines 2-11							
10 the	ill in the average monthly incomo 11(10A). For example, if you are fee 6 months, add the income for a couses own the same rental prop	iling on September 15, the 6- Il 6 months and divide the tota	month perional by 6. Fill	od would in the re	be March 1 the sult. Do not inc	ough Auude any	ugust 31. If the amount m	ount of your monthly incom ore than once. For examp	ne varied during le, if both
							umn A tor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, payroll deductions).	tips, bonuses, overtime	, and con	nmissi	ons (before a	II \$	13,941.00	\$	
3.	Alimony and maintenance Column B is filled in.	payments. Do not includ	e paymen	ts from	a spouse if	\$	0.00	\$	
4.	All amounts from any sour of you or your dependents from an unmarried partner, and roommates. Include regilled in. Do not include payments	s, including child suppor members of your househo ular contributions from a s	t. Include ld, your de	regula: epende	r contributions nts, parents,		0.00	\$	
5.	Net income from operating profession, or farm	g a business,	Debtor 1						
	Gross receipts (before all de	eductions)	\$	0.00					
	Ordinary and necessary ope	erating expenses	-\$	0.00					
	Net monthly income from a l	business, profession, or fa	ırm \$	0.00	Copy here	·> \$	0.00	\$	
6.	Net income from rental an	d other real property	Debtor 1						
	Gross receipts (before all de	eductions)	\$	0.00					
	Ordinary and necessary ope	erating expenses	- \$	0.00					
	Net monthly income from re	ntal or other real property	\$	0.00	Copy here	·> \$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc

Main Document Page 50 of 64 Luis Fernando Montoya, Jr. Case number (if known) Debtor 1 Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 13.941.00 +|\$ 13,941.00 each column. Then add the total for Column A to the total for Column B. Total average monthly income **Determine How to Measure Your Deductions from Income** Part 2: 12. Copy your total average monthly income from line 11. 13,941.00 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 13,941.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 13,941.00 15a. Copy line 14 here=>____ Multiply line 15a by 12 (the number of months in a year). **x** 12

15b. The result is your current monthly income for the year for this part of the form.

167,292.00

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc

Main Document Page 51 of 64
Luis Fernando Montoya, Jr.

Case number (if known)

16	. Calculate the median family income that applies to y	ou. Follow these steps:		
	16a. Fill in the state in which you live.	CA		
	16b. Fill in the number of people in your household.	1		
	16c. Fill in the median family income for your state and s To find a list of applicable median income amounts instructions for this form. This list may also be avail	go online using the link specified in t	he separate \$	52,416.00
17	. How do the lines compare?			
	17a. Line 15b is less than or equal to line 16c. O 11 U.S.C. § 1325(b)(3). Go to Part 3. Do No			
	17b. Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 at	lation of Your Disposable Income (
Par	t 3: Calculate Your Commitment Period Under 11 U	J.S.C. § 1325(b)(4)		
18.	Copy your total average monthly income from line 1	١.	\$	13,941.00
19.	Deduct the marital adjustment if it applies. If you are contend that calculating the commitment period under 1° spouse's income, copy the amount from line 13.			
	19a. If the marital adjustment does not apply, fill in 0 on	ine 19a.	- \$	0.00
	19b. Subtract line 19a from line 18.		\$_	13,941.00
20.	Calculate your current monthly income for the year.	Follow these steps:		
	20a. Copy line 19b		\$ _.	13,941.00
	Multiply by 12 (the number of months in a year).			x 12
	20b. The result is your current monthly income for the year	ear for this part of the form	\$_	167,292.00
	20c. Copy the median family income for your state and s	size of household from line 16c	\$	52,416.00
	21. How do the lines compare?			
	Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	e ordered by the court, on the top of p	page 1 of this form, check box 3,	The commitment
	■ Line 20b is more than or equal to line 20c. Uni commitment period is 5 years. Go to Part 4.	ess otherwise ordered by the court, o	n the top of page 1 of this form,	check box 4, The
Par	t 4: Sign Below			
	By signing here, under penalty of perjury I declare that the	ne information on this statement and i	n any attachments is true and co	rrect.
)	(/s/ Luis Fernando Montoya, Jr.			
•	Luis Fernando Montoya, Jr. Signature of Debtor 1			
	Date August 31, 2017			
	MM / DD / YYYY If you checked 173, do NOT fill out or file Form 122C-2			
	If you checked 17a, do NOT fill out or file Form 122C-2.	sia form. On line 20 of the 11 form	vous oursent manufall de come	m line 4.4 =b - · ·
	If you checked 17b, fill out Form 122C-2 and file it with the	iis ioiin. On iine 39 of that form, copy	your current monthly income fro	m iine 14 above.

Debtor 1

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 52 of 64

			_		
Fill in	this informa	ation to identify your case:	4		
Debto	or 1 <u>Lu</u>	iis Fernando Montoya, Jr.			
Debto (Spou	or 2 use, if filing)				
United	d States Bank	ruptcy Court for the: Central District of California			
Case (if kno	number own)		☐ Check i	if this is an amended f	iling
Officia	ıl Form 122C-	<u>-2</u>			
Cha	pter 13	Calculation of Your Disposable I	ncome		04/16
Comm Be as space	complete and is needed, at	a, you will need your completed copy of Chapter 13 Statem of (Official Form 122C-1). d accurate as possible. If two married people are filing tog ttach a separate sheet to this form, Include the line number by tite your name and case number (if known).	ether, both are equally respon	sible for being accurat	e. If more
Part 1	Calcula	ate Your Deductions from Your Income			
the	questions in	venue Service (IRS) issues National and Local Standards for lines 6-15. To find the IRS standards, go online using the yalso be available at the bankruptcy clerk's office.			
exp	enses if they	nse amounts set out in lines 6-15 regardless of your actual exp are higher than the standards. Do not include any operating ex not deduct any amounts that you subtracted from your spouse	spenses that you subtracted from	n income in lines 5 and 6	
If y	our expenses	differ from month to month, enter the average expense.			
Not	te: Line numbe	ers 1-4 are not used in this form. These numbers apply to infor	mation required by a similar forr	n used in chapter 7 case	s.
5.	The numbe	er of people used in determining your deductions from inco	ome		
	plus the nun	umber of people who could be claimed as exemptions on your famber of any additional dependents whom you support. This nur of people in your household.		1	
Nat	tional Standa	You must use the IRS National Standards to ans	wer the questions in lines 6-7.		
6.		ning, and other items: Using the number of people you entere fill in the dollar amount for food, clothing, and other items.	d in line 5 and the IRS National	\$	639.00
7.	the dollar ar people who	ket health care allowance: Using the number of people you e mount for out-of-pocket health care. The number of people is so are 65 or olderbecause older people have a higher IRS allow this IRS amount, you may deduct the additional amount on line	plit into two categoriespeople v vance for health car costs. If you	vho are under 65 and	

Official Form 22C-2

Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Case 6:17-bk-17316-MH

Main Document

Page 53 of 64

Luis Fernando Montoya, Jr. Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 1 7c. Subtotal. Multiply line 7a by line 7b. 49.00 Copy here=> \$ 49.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 117 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 0.00 Copy here=> 7g. **Total.** Add line 7c and line 7f 49.00 49.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 448.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,328.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Navy Federal Credit Union** 4,038.00 Copy Repeat this amount 4.038.00 4,038.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 0.00 0.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Des Main Document Page 54 of 64

Luis Fernando Montoya, Jr. Case number (if known) Debtor 1 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 300.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. **Describe Vehicle 1:** Vehicle 1 2017 Subaru Crosstrek 3,500 miles 13a. Ownership or leasing costs using IRS Local Standard..... 485.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment **Chase Auto Finance** 355.00 Repeat this Copy amount on line 33b. **Total Average Monthly Payment** 355.00 355.00 Copy net Vehicle 1 13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 130.00 130.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment \$ Copy Repeat this here amount on line Total average monthly payment 0.00 Copy net 13f. Net Vehicle 2 ownership or lease expense Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation.

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may

0.00

not claim more than the IRS Local Standard for Public Transportation.

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 55 of 64

Debtor 1 Luis Fernando Montoya, Jr. Case number (if known)

		n addition to the expense d the following IRS categories		s listed above	, you are allowed your monthly expenses	for	
16.	self-employment taxes, soci	al security taxes, and Medic wever, if you expect to rece m the total monthly amount	are taxe	s. You may ind refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	3,846.00
17.	Involuntary deductions: The contributions, union dues, and		uctions th	nat your job re	quires, such as retirement		
	Do not include amounts that	are not required by your jol	b, such a	s voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together, include paym	ents that you make for your life insurance on your depe	spouse's	s term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
19.	 Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 						0.00
20.	Education: The total month	y amount that you pay for e	ducation	that is either	required:		
	as a condition for your jo				·		
	for your physically or mentally challenged dependent child if no public education is available for similar services.						
21.	 Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. 						0.00
22			•		amount that you pay for health care	· —	
22.	22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.						0.00
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						0.00
				o i, or any ani	ount you previously deducted.	+\$	0.00
24.	Add all of the expenses all Add lines 6 through 23.	owed under the IRS expe		•	ount you previously deducted.	\$	5,412.00
		·	nse allo	wances. s allowed by the	ne Means Test.		
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit	These are additional d Note: Do not include a	nse alloweduction ny exper	wances. s allowed by these allowances ccount expen	ne Means Test.	\$	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insuran	These are additional d Note: Do not include a	nse alloweduction ny exper	wances. s allowed by these allowances ccount expen	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health	\$	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insuran your dependents.	These are additional d Note: Do not include a	nse allowed action ny experior avings a bunts that	wances. s allowed by the seallowances ccount expensions are reasonable.	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health	\$	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insurance, your dependents. Health insurance	These are additional d Note: Do not include a y insurance, and health sace, and health savings acco	eduction ny exper avings a ounts that	wances. s allowed by the seallowances count expension are reasonab	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health	\$	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance, your dependents. Health insurance Disability insurance	These are additional d Note: Do not include a y insurance, and health sace, and health savings acco	eduction ny exper avings a ounts that	wances. s allowed by the see allowances ccount expent are reasonab 288.00 0.00	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health	\$	
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurancy your dependents. Health insurance Disability insurance Health savings account	These are additional d Note: Do not include a y insurance, and health sa ce, and health savings acco	eduction ny exper avings a ounts that \$	wances. s allowed by the seallowances ccount experiment are reasonabed 288.00 0.00 80.00	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, o	\$r	5,412.00
Add	Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance, your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to	These are additional d Note: Do not include a y insurance, and health sa ce, and health savings acco	eduction ny exper avings a ounts that \$	wances. s allowed by the seallowances ccount experiment are reasonabed 288.00 0.00 80.00	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, o	\$r	5,412.00
Add 25.	Add lines 6 through 23. Ilitional Expense Deductions Health insurance, disability insurance, disability insurancy our dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you yes Continued contributions to continue to pay for the reason	These are additional d Note: Do not include a y insurance, and health sace, and health sace, and health sace, and health savings accordant amount? The care of household of the care of household of the care and necessary care as of your immediate family who	eduction ny exper avings a bunts that \$ \$ r family is and suppoor is unab	wances. s allowed by the seal allowances are reasonable are reason	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, o Copy total here=> e actual monthly expenses that you will rely, chronically ill, or disabled member of uch expenses. These expenses may	\$r	5,412.00
25.	Add lines 6 through 23. Ilitional Expense Deductions Health insurance, disability insurance, disability insurancy your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you yes Continued contributions to continue to pay for the reason your household or member of include contributions to an ail.	These are additional dinote: Do not include a sy insurance, and health sace, and health sace, and health sace, and health savings according to the care of household of a count of a qualified ABLE priolence. The reasonably not included in the count of a qualified ABLE priolence.	eduction ny exper avings a ounts that \$ \$ r family r and suppro is unab program. ecessary	wances. s allowed by the seallowances ccount expension are reasonable 288.00 0.00 80.00 368.00 members. The port of an elder ole to pay for seallowances	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, o Copy total here=> e actual monthly expenses that you will rely, chronically ill, or disabled member of uch expenses. These expenses may	\$r	368.00

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 56 of 64

28. Additional home energy costs. Your home energy costs are included in your insurance line 8. If you believe that you have home energy costs that are more than the home energy costs 8, then fill in the excess amount of home energy costs You must give your case trustee documentation of your actual expenses, and you must st amount claimed is reasonable and necessary.	s included in expenses on line	è				
8, then fill in the excess amount of home energy costs You must give your case trustee documentation of your actual expenses, and you must sl)				
	how that the additional	\$_	0.00			
29. Education expenses for dependent children who are younger than 18. The monthly e \$160.42* per child) that you pay for your dependent children who are younger than 18 year public elementary or secondary school.	expenses (not more than ars old to attend a private or					
You must give your case trustee documentation of your actual expenses, and you must exclaimed is reasonable and necessary and not already accounted for in lines 6-23.	explain why the amount					
* Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after	er the date of adjustment.	\$_	0.0			
30. Additional food and clothing expense. The monthly amount by which your actual food higher than the combined food and clothing allowances in the IRS National Standards. The than 5% of the food and clothing allowances in the IRS National Standards.						
To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.						
You must show that the additional amount claimed is reasonable and necessary.		\$_	0.0			
31. Continuing charitable contributions. The amount that you will continue to contribute in instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).	the form of cash or financial					
Do not include any amount more than 15% of your gross monthly income.		\$_	1,300.0			
32. Add all of the additional expense deductions. Add lines 25 through 31.		\$	1,668.00			
Deductions for Debt Payment						
33. For debts that are secured by an interest in property that you own, including home n loans, and other secured debt, fill in lines 33a through 33e.	mortgages, vehicle					
To calculate the total average monthly payment, add all amounts that are contractually due creditor in the 60 months after you file for bankruptcy. Then divide by 60.	e to each secured					
Mortgages on your home		Averag	ge monthly			
33a. Copy line 9b here	=>	\$	4,038.00			
Loans on your first two vehicles						
33b. Copy line 13b here	=>	\$	355.00			
33c. Copy line 13e here		\$	0.00			
33d. List other secured debts:						
Name of each creditor for other secured debt Identify property that secures the debt	Does payment include taxes or insurance?					
	□ No					
-NONE-	☐ Yes	\$				
	□ No					
	☐ Yes	\$				
	□ No					
	□ No □ Yes +	\$				

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc

Main Document Page 57 of 64
Luis Fernando Montoya, Jr. Case number (if known)

	debts that you listed in lin property necessary for yo			lependents?						
■ No.	Go to line 35.									
☐ Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in	ssession of your property	addition to to (called the	the payments cure amount).						
Name of the	creditor	Identify property that see	cures the de	bt	То	tal cure amount			onthly mount	
-NONE-				\$			÷ 6	0 = \$	mount	
					$\overline{}$			Сору		
				Total	\$_	0.00)	total here=>	\$_	0.00
•	owe any priority claims - so due as of the filing date o		• • •	•	hat					
■ No.	Go to line 36.		·	•						
	Fill in the total amount of a ongoing priority claims, such			de current or						
	Total amount of all past-d	ue priority claims			\$	0.00	_	÷ 60	\$_	0.00
36. Projecte	d monthly Chapter 13 plar	payment			\$	2,995.00				
Office of the Exec To find a li	nultiplier for your district as s the United States Courts (fo utive Office for United States ist of district multipliers that inclunstructions for this form. This lis	r districts in Alabama and s Trustees (for all other di des your district, go online us	North Caro stricts).	lina) or by	X	6.60				
•	monthly administrative expe	•	barmaptoy o	ion o omoo.		\$197.67		opy tota ere=>		197.67
	of the deductions for deb es 33e through 36.	t payment.							\$	4,590.67
Total Deduc	tions from Income									
38. Add all c	of the allowed deductions.									
	ne 24, All of the expenses al e allowances	lowed under IRS	\$	5,412.00	0_					
Copy lin	ne 32, All of the additional ex	pense deductions	\$	1,668.0	0					
Copy lin	ne 37, All of the deductions t	or debt payment	+\$	4,590.6	7	٦				
Total de	eductions		\$	11,670.6	7_	Copy total here=	>		\$	11,670.67

Debtor 1

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 58 of 64

Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) 39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here \$\frac{1}{2}\$ 11,670.67 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and circumstances and documentation for the expenses.	13,941.00
40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => \$ 11,670.67 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special	13,941.00
children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => \$ 11,670.67 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special	
employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => \$ 11,670.67 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special	
43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special	
43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special	
Describe the special circumstances Amount of expense	
\$	
<u> </u>	
\$	
Total \$ 0.00 Copy here=> \$ 0.00	
44. Total adjustments. Add lines 40 through 43. => \$ 11,770.67 here=> -\$	11,770.67
45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.	2,170.33
Part 3: Change in Income or Expenses	
46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.	
Form Line Reason for change Date of change Increase or decrease?	ige
□ 122C-1 □ Increase □ 122C-2 □ Decrease □ 122C-1 □ Increase □ 122C-2 □ Decrease □ 122C-1 □ Increase □ 122C-2 □ Decrease □ 122C-2 □ Decrease	
☐ 122C-1 ☐ Increase ☐ Decrease \$ ☐ Decrease \$	

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Main Document Page 59 of 64

Debtor 1	Luis Fernando Montoya, Jr.	Case number (if known)
Part 4:	Sign Below	
В	By signing here, under penalty of perjury you declare that the inform	ation on this statement and in any attachments is true and correct.
_	/s/ Luis Fernando Montoya, Jr. Luis Fernando Montoya, Jr. Signature of Debtor 1	
	August 31, 2017 MM / DD / YYYY	

Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc Case 6:17-bk-17316-MH Main Document

Page 60 of 64

Luis Fernando Montoya, Jr. Debtor 1

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 02/01/2017 to 07/31/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Winshuttle, LLC

Income	bv	Month:
IIICOIIIC	UY	TVIOITUI.

6 Months Ago:	02/2017	\$13,466.00
5 Months Ago:	03/2017	\$11,833.00
4 Months Ago:	04/2017	\$19,068.00
3 Months Ago:	05/2017	\$10,754.00
2 Months Ago:	06/2017	\$17,051.00
Last Month:	07/2017	\$11,474.00
	Average per month:	\$13.941.00

Main Documen	t Page 61 of 64
Main Documen Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address Anthony B. Vigil, Esq. 27201 Puerta Real, Suite 300 Mission Viejo, CA 92691 949-432-4808 Fax: 949-432-4804 California State Bar Number: 259597 anthony@vigillawgroup.com	t Page 61 of 64 FOR COURT USE ONLY
□ Debtor(s) appearing without an attorney	
Attorney for Debtor	
	CASE NO.: CHAPTER: 13
	VERIFICATION OF MASTER MAILING LIST OF CREDITORS [LBR 1007-1(a)]
Debtor(s).	
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attomaster mailing list of creditors filed in this bankruptcy case, consistent with the Debtor's schedules and I/we assume all	consisting of <u>3</u> sheet(s) is complete, correct, and responsibility for errors and omissions.
Date: August 31, 2017	/s/ Luis Fernando Montoya, Jr. Siganture of Debtor 1
	Sigariture of Debtor 1
Date:	Signature of Debtor 2 (joint debtor)) (if applicable)
Date: August 31, 2017	/s/ Anthony B. Vigil, Esq. Signature of Attorney for Debtor (if applicable)
	orginature of Attenties for Debtor (II applicable)

Case 6:17-bk-17316-MH Doc 1 Filed 08/31/17 Entered 08/31/17 10:15:43 Desc

Luis Fernando Montoya, Jr. 14540 Artic Fox Ave. Eastvale, CA 92880-1092

Anthony B. Vigil, Esq. Law Offices of Anthony B. Vigil, APC 27201 Puerta Real, Suite 300 Mission Viejo, CA 92691

BMW Financial Services Attn: Bankruptcy Department Po Box 3608 Dublin, OH 43016

Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130

Chase Auto Finance National Bankruptcy Dept 201 N Central Ave Ms Az1-1191 Phoenix, AZ 85004

Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Credit One Bank Na Po Box 98872 Las Vegas, NV 89193

Dell Financial Services Attn: Bankruptcy Po Box 81577 Austin, TX 78708 Denise Gumenberg 14540 Arctic Fox. Ave. Eastvale, CA 92880

Discover Financial PO Box 3025 New Albany, OH 43054

Dsnb Bloomingdales Attn: Bankruptcy Po Box 8053 Mason, OH 45040

Franchise Tax Board BANKRUPTCY SECTION MS A340 P.O. BOX 2952 Sacramento, CA 95812-2952

Frdmroad Fin 10605 Double R Blvd Reno, NV 89521

Harley Davidson Financial Attention: Bankruptcy Po Box 22048 Carson City, NV 89721

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

Navy Federal Credit Union Attn: Bankruptcy PO Box 3000 Merrifield, VA 22119 Nissan Acceptance Co Pob 660366 Dallas, TX 75266

Rocio Garcia 2134 S. Standard Ave. Santa Ana, CA 92707

Synchrony Bank/Amazon Attn: Bankruptcy Po Box 956060 Orlando, FL 32896

U.S. Dept Of Ed/Great Lakes Attn: Bankruptcy 2401 International Lane Madison, WI 53704

Vangaurd University 55 Fair. Drive Costa Mesa, CA 92626

Volkswagen Credit, Inc Po Box 3 Hillsboro, OR 97123